## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

Schedule E)	FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)	FEC IDENTIFICATION NUMBER ▼
Humanity Forward Fund	
	C C00712497
Check if X 24-hour report 48-hour report New report X Amends re	port filed on 02 08 2020
Full Name of Payee	Date of Public Distribution/Dissemination
Card Services Center	Man / Dab / Yayayay
M 27 A 11	02 07 2020
Mailing Address 200 Chastain Center Blvd., #200	Amount
City State Zip Code	457.96
Kennesaw GA 30144	Transaction ID : PDT.E.71 Date of Disbursement or Obligation
Purpose of Expenditure Postcards - CA, FL, TX, OH  Category/ Type 24	E 02 07 7 2020
Name of Federal Candidate Support	Office Sought: House District:
Yang, Andrew, , ,	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 187905.11	Disbursement For:  Primary General 2020
	Other (specify)
Full Name of Payee Card Services Center	Date of Public Distribution/Dissemination
Mailing Address 200 Chastain Center Blvd #200	02 07 2020
Mailing Address 200 Chastain Center Blvd., #200	Amount
City State Zip Code	457.96
Kennesaw GA 30144	Transaction ID : PDT.E.72
Purpose of Expenditure  Category/  Category/	Date of Disbursement or Obligation
Postcards - CA, FL, TX, OH  Type  24f	02 07 2020
Name of Federal Candidate Support	Office Sought: House District:
Yang, Andrew, , ,	resident Senate State: IA
Calendar Year-To-Date Per Election for Office Sought 187905.11	Disbursement For: X Primary General 2020
	Other (specify) -
(a) SUBTOTAL of Itemized Independent Expenditures	915.92
(b) SUBTOTAL of Unitemized Independent Expenditures	···· <b>&gt;</b>
(c) TOTAL Independent Expenditures	···· <b>&gt;</b>
Under penalty of perjury I certify that the independent expenditures reported herein wer with, or at the request or suggestion of, any candidate or authorized committee or agent party committee) any political party committee or its agent.	•
Lutz, Kim, , ,	M = M / D = D / Y = Y = Y
[Electronically Filed] Da	
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## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	TI EXI EITE	ITOTIES		PAGE 2 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Humanity Forward Fund				C C00712497
Check if 24-hour report 48-hour report	New rep	ort X Amends repo		02 08 2020
Full Name of Payee			Date of	of Public Distribution/Dissemination
Cohen, Lawrence, , ,			M	02 / 07 / 2020
Mailing Address 12006 Hammack Street, Apt. C			Amour	nt
City	State	Zip Code		12000.00
Culver City	CA	90230		action ID : EDT.E.83 of Disbursement or Obligation
Purpose of Expenditure Campaign Consulting		Category/ Type 24E	M	02 06 7 2020
Name of Federal Candidate		<b>x</b> Support	Office Sough	t: House District:
Yang, Andrew, , ,		Oppose	<b>x</b> Preside	ent Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , ,	187905.11	Disbursement 2020 Of	t For:   ✓ Primary   General  ther (specify)
Full Name of Payee	<del></del>		Date of	of Public Distribution/Dissemination
Cohen, Lawrence, , ,			M	02 07 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 12006 Hammack Street, Apt. C			Amou	
City	State	Zip Code		1014.93
Culver City	CA	90230		ction ID : PDT.E.70 of Disbursement or Obligation
Purpose of Expenditure Postcards - CA, FL, TX, OH		Category/ Type 24E		02 07 2020
Name of Federal Candidate		<b>✗</b> Support	Office Sough	t: House District:
Yang, Andrew, , ,		Oppose	<b>✗</b> Preside	ent Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	7 1 1 7	187905.11	Disbursemen 2020 O	t For:   Primary General ther (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditure	es			13014.93
				7
(b) SUBTOTAL of Unitemized Independent Expend	itures		•	7 7
(c) TOTAL Independent Expenditures			•	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.				
Lutz, Kim, , ,	[Electron	ically Filed] Date	04	20 / 2020
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	LXI LIVO	TOTILO		PAGE 3 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)				FEC IDENTIFICATION NUMBER ▼
Humanity Forward Fund				C C00712497
Check if 24-hour report 48-hour report	New repo	ort X Amends repo		02 08 2020
Full Name of Payee			Date	of Public Distribution/Dissemination
Cohen, Lawrence, , ,				02 07 7 2020
Mailing Address 12006 Hammack Street, Apt. C			Amou	nt
City	State	Zip Code	— L.	1515.71
Culver City	CA	90230		action ID : PDT.E.79 of Disbursement or Obligation
Purpose of Expenditure Brochures - CA, FL, TX, OH		Category/ Type 24E		02 01 / 2020
Name of Federal Candidate		<b>x</b> Support	Office Sough	it: House District:
Yang, Andrew, , ,		Oppose	<b>✗</b> Preside	ent Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , , ,	187905.11	Disbursemer 2020	ther (specify) ►
Full Name of Payee			Date	of Public Distribution/Dissemination
Cohen, Seth Adam, , ,				02 07 2020
Mailing Address 1740 Winona Blvd., #308			Amou	int
City	State	Zip Code	— I I .	12000.00
Los Angeles	CA	90027		action ID : EDT.E.82 of Disbursement or Obligation
Purpose of Expenditure Campaign Consulting - CA, FL, TX, OH		Category/ Type 24E		02 / 07 / 2020
Name of Federal Candidate		<b>x</b> Support	Office Sough	nt: House District:
Yang, Andrew, , ,		Oppose	<b>✗</b> Presid	ent Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	, , ,	187905.11	Disbursemer 2020	nt For:   Primary General  Other (specify)   ■
(a) SUBTOTAL of Itemized Independent Expenditure	s			13515.71
( <b>L)</b>				13313.71
(b) SUBTOTAL of Unitemized Independent Expenditu	ıres		•	
(c) TOTAL Independent Expenditures			•	7 1 7 1 1 7 1
Under penalty of perjury I certify that the independent with, or at the request or suggestion of, any candidate party committee) any political party committee or its a	te or authorized			
Lutz, Kim, , ,	[Electron	ically Filed] Date	04	20 / 2020
Signature				

## 24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES

Schedule E)	ONLO	PAGE 4 OF 4 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Humanity Forward Fund		C C00712497
Check if 24-hour report 48-hour report New report	X Amends report filed	d on 02 08 2020
Full Name of Payee		Date of Public Distribution/Dissemination
Cohen, Seth Adam, , ,		02 07 2020
Mailing Address 1740 Winona Blvd., #308		Amount
City State Zi	p Code	367.82
Los Angeles CA 90	0027	Transaction ID : PDT.E.80  Date of Disbursement or Obligation
Purpose of Expenditure Online Ads - CA, FL, TX, OH	Category/ Type 24E	02 07 / 9 9 9
Name of Federal Candidate	<b>✗</b> Support Office	e Sought: House District:
Yang, Andrew, , ,	Oppose x	President Senate State: IA
Calendar Year-To-Date Per Election for Office Sought	87905.11 Disb 2020	ursement For:    Primary General  Other (specify) ▶
Full Name of Payee		Date of Public Distribution/Dissemination
Mailing Address		M = M / D = D / Y = Y = Y
Mailing Address		Amount
City State Zi	p Code	
		Date of Disbursement or Obligation
Purpose of Expenditure	Category/ Type	M = M / D = D / Y = Y = Y
Name of Federal Candidate	Support Office	ee Sought: House District:
	Oppose	President Senate State:
Calendar Year-To-Date Per Election for Office Sought	Disb	oursement For: Primary General  Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	<b>&gt;</b>	367.82
(b) SUBTOTAL of Unitemized Independent Expenditures	·····	
(c) TOTAL Independent Expenditures	·····	27814.38
Under penalty of perjury I certify that the independent expenditures re with, or at the request or suggestion of, any candidate or authorized corparty committee) any political party committee or its agent.		
Lutz, Kim, , , [Electronical	17 7717 17	04 20 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature		